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**FAX TRANSMISSION****DATE:** January 5, 2004**PTO IDENTIFIER:** Application Number 09/719277-Conf. #7039  
Patent Number**Inventor:** Andrea D. Branch et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** LAHIVE & COCKFIELD, LLP

Megan E. Williams

**PHONE:** (617) 227-7400**Attorney Dkt. #:** RII-003CPUS**PAGES (Including Cover Sheet):** 62

**CONTENTS:** One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page);  
Amendment Transmittal (1 page);  
Amendment and Response with attached Appendices A-D (56 pages);  
Fee Transmittal (1 page in duplicate);  
Certificate of Transmission under 37 CFR 1.8 (1 page); and  
Charge \$55.00 to deposit account 12-0080.

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PTO/SB/22 (08-03)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket No. (Optional) R11-003CPUS	
In re Application of <b>Andrea D. Branch et al.</b>			
Application Number <b>09/719,277-Conf. #7039</b>		Filed <b>April 13, 2001</b>	
For: <b>NOVEL HEPATITIS C VIRUS PEPTIDES AND USES THEREOF</b>			
Art Unit <b>1648</b>		Examiner <b>D. Wortman</b>	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number \_\_\_\_\_

☒ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 43,270

January 5, 2004  
Date

(617) 227-7400  
Telephone Number

Megan E. Williams  
Signature

Megan E. Williams  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below.

Dated: January 5, 2004

Signature: Megan E. Williams

(Megan E. Williams)